

SRMUN VIRTUAL REGISTRATION FEES PAYMENT FORM

Step 1: School Registration School Fee: \$0.00

The school registration fee has been waived for SRMUN Virtual. There is no attendance fee for faculty advisors.

Sten 2: Delegate Registration Fee

	Step 2. Den	cgate Registration i	cc	
Delegate Fee:				
\$50 / \$55* x(no. of delegates) = \$	(Total Del	egate Fee)	
*If paying by credit card				includes Head
Delegates, even if they are				
			•	
Total Fee: \$	(Sum of fees)			
Step	o 3: Payment Method	d, please check one	of the followi	ing:
☐ Check* (Check)	number:)	□ Visa**	☐ MasterCard**
* If paying by check, p the check.	olease make payment t	to "SRMUN Inc." Pl	ease include	your school's name on
** If paying by Visa or	: MasterCard, please f	ill out the following	information:	
Name of institution:				
Name as it appears on t	he card:			
*Billing address:				
*Billing City, State, and	l Zip Code:			
Card Number:		Back panel secu	urity code:	
Expiration date:	_/	Amount to charg	ge: \$	
Signature of cardholder				
* For payme	ents, please provide y	our credit card bill	ing address a	and zip code.

Please mail this form to:

SRMUN, Inc.

c/o Mr. Michael Oleaga, Executive Director PO Box 944 Bronx, NY 10472

If you have any questions, please email michael.oleaga@srmun.org.